

DELINEATION OF PRIVILEGES - OPTOMETRY SERVICE

For use of this form, see AR 40-68; the proponent agency is OTSG

(DA Form 5440A-R Must be Completed and Attached to this Form)

CHECK ONE

☐ AC☐ USAR☐ ARNG

REQUESTED BY

DATE

PRIVILEGES

RECOMMENDATIONS BY DEPT. / SVS. CHIEF

Assignment of clinical privileges in optometry will be based on education, clinical training, experience, and demonstrated competence. The category of privilege requested should be specified.

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SUPPORT**Category I.**

Privileges in this category are for uncomplicated illnesses, injuries, or routine procedures which may require diagnostic drugs. When doubt exists as to the diagnosis or in cases in which improvement is not soon apparent, consultation will be sought.

Privileges may be granted to those optometrists who have satisfactorily completed formal Optometry training but have not been licensed to practice Optometry (*requires direct supervision until licensed*).

Examples:

Administration of commonly used vision/eye tests with guidance in interpretation of test results and in selection of more specialized diagnostic measures.

Assignment of patients whose vision/eye disorders are not severe.

Category II.

Privileges include Category I, plus practitioners may evaluate, diagnose and treat difficult and complex vision/eye disorders. May act as consultants but are expected to request consultation when:

(1) The diagnosis and/or management remains in doubt over an unduly long period of time.

(2) Unexpected complications arise which are outside this level of competence.

(3) specialized treatment measures are contemplated with which they are not familiar.

The use of selected therapeutic drugs and the writing of prescriptions for selected medications may be granted when recommended by the Therapeutic Agents Board, the credentials committee, and the physician charged with direction of the clinical activities concerned, and approved by the Commander.

Privileges may be granted to those optometrists who have satisfactorily completed formal Optometry training or have satisfied the Credentials Committee with their training, experience and competence.

Examples: Diagnostic Drugs Ocular Pathology
Therapeutic Drugs Surveillance
Occupational Vision Ocular Injury

Category III.

Privileges include those in Categories I and II to the extent that qualification criteria are met, plus those associated with illnesses or problems requiring an unusual degree of expertise and competence. Practitioners with their privileges have the highest level of competence within a given field and are qualified to act as consultant but will request consultation when needed.

Practitioners with these privileges are expected to have training and experience considered appropriate for a subspecialty.

Examples.

Visual Evoked Response.

Research Protocol Administration on Use of Selected Therapeutic Drugs.

Evaluate, coordinate with Ophthalmology and co-manage acute ocular conditions requiring therapeutic treatment and close monitoring through duration of symptoms.

Co-manage complex or critical illnesses, injuries or conditions which carry a serious threat to vision when no trained eye physician is available.

ADDITIONS (Specify)**EXCEPTIONS (Recommended by Department Chief)**